

MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT

| | | | | | | | |
|---|--|--|--|---|--|--|--|
| Business Name Express Convenience | | Business Address 700 Third Street | | County Winnebago | | ID # 22-24010 | |
| Legal Licensee US Venture Inc. | | Mailing Address (Licensee) 425 Better Way, Appleton | | Telephone # (920) 722-3639 | | | |
| Date of inspection 2/7/13 | | Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Type of Establishment <input type="checkbox"/> Restaurant <input checked="" type="checkbox"/> Retail <input type="checkbox"/> School | | Is operator Certified <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> pending <input type="checkbox"/> N/A | |
| Inspection Type <input type="checkbox"/> pre-inspection <input checked="" type="checkbox"/> routine inspection <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Downtime <input type="checkbox"/> Non inspection visit | | | | Action Taken <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Conditional Permit 30 days <input type="checkbox"/> Withhold Permit <input type="checkbox"/> License suspended <input type="checkbox"/> License revoked <input type="checkbox"/> Other | | | |
| Person in Charge Charlene Womack | | | | CFM # and expiration CFM # file expiration date | | | |
| FOODBORNE ILLNESS RISK FACTORS | | | | | | | |
| Circle designated compliance status for each item IN -in compliance OUT – out of compliance N/O – not observed N/A – not applicable | | | | Mark an X in appropriate box for COS and/or R COS – corrected on site during inspection R - repeat violation | | | |

| COMPLIANCE STATUS | | | COS | R | COMPLIANCE STATUS | | | COS | R |
|--|-----|--|-------------------------------------|-------------------------------------|---|-----|---|-------------------------------------|--------------------------|
| DEMONSTRATION OF KNOWLEDGE | | | | | POTENTIALLY HAZARDOUS FOOD TEMPERATURE | | | | |
| 1A | IN | Certified food manager, duties | <input type="checkbox"/> | <input type="checkbox"/> | 16 | IN | Proper cooking time and temperature | <input type="checkbox"/> | <input type="checkbox"/> |
| 1B | IN | Person in charge, ID knowledgeable, duties and responsibilities | <input type="checkbox"/> | <input type="checkbox"/> | 17 | NO | Proper re-heating procedures for hot holding | <input type="checkbox"/> | <input type="checkbox"/> |
| EMPLOYEE HEALTH | | | | | CONSUMER ADVISORY | | | | |
| 2 | IN | Management awareness, policy present | <input type="checkbox"/> | <input type="checkbox"/> | 23 | NA | Consumer advisory supplied | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | IN | Proper use of reporting, restriction and exclusion | <input type="checkbox"/> | <input type="checkbox"/> | HIGHLY SUSEPTABLE POPULATIONS | | | | |
| GOOD HYGENIC PRATICES | | | | | 24 | NA | Pasteurized foods used; prohibited foods not offered | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | IN | Proper eating, tasting, drinking | <input type="checkbox"/> | <input type="checkbox"/> | CHEMICAL | | | | |
| 5 | IN | No discharge from eyes, nose and mouth | <input type="checkbox"/> | <input type="checkbox"/> | 25 | NA | Food additives approved and properly use | <input type="checkbox"/> | <input type="checkbox"/> |
| PREVENTING CONTAMINATION FROM HANDS | | | | | 26 | OUT | Toxic substances properly identified, stored, used | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6 | IN | Hands cleaned and properly washed | <input type="checkbox"/> | <input type="checkbox"/> | CONFORMANCE WITH APPROVED PROCEDURES | | | | |
| 7 | IN | No bare hand contact or using approved plan | <input type="checkbox"/> | <input type="checkbox"/> | 27 | NA | Compliance with variance, specialized process, HACCP plan | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | IN | Adequate hand washing facilities supplied and accessible | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Risk Factors: are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury. | | | | |
| APPROVED SOURCE | | | | | Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made. | | | | |
| 9 | IN | Food obtained from approved source | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 10 | IN | Food received at proper temperature | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 11 | IN | Food in good condition, safe, unadulterated | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 12 | NA | Records available, shell stock tags, parasite destruction | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| PROTECTION FROM CONTAMINATION | | | | | | | | | |
| 13 | OUT | Food separated and protected | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 14 | IN | Food contact surfaces cleaned and sanitized | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | |
| 15 | IN | Proper disposition of returned, previously served, reconditioned & unsafe food | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |

| GOOD RETAIL PRACTICES | | | | | | | | | |
|---|-----|---|--------------------------|--------------------------|-------------------------------|-----|---|--------------------------|--------------------------|
| Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food. Mark an X in box if item is not in compliance. Mark an X in appropriate box for COS/R. COS – corrected on site during inspection R - repeat violation | | | | | | | | | |
| SAFE FOOD AND WATER | | | COS | R | PROPER USE OF UTENSILS | | | | |
| 28 | NA | Pasteurized eggs used where required | <input type="checkbox"/> | <input type="checkbox"/> | 41 | IN | In use utensils properly stored | <input type="checkbox"/> | <input type="checkbox"/> |
| 29 | IN | Water and ice from approved source | <input type="checkbox"/> | <input type="checkbox"/> | 42 | IN | Utensils equipment and linen properly stored and used | <input type="checkbox"/> | <input type="checkbox"/> |
| 30 | NA | Variance obtained for specialized processing methods | <input type="checkbox"/> | <input type="checkbox"/> | 43 | OUT | Single-use and Single service articles properly stored and used | <input type="checkbox"/> | <input type="checkbox"/> |
| FOOD TEMPERATURE CONTROL | | | | | 44 | IN | Gloves properly used | <input type="checkbox"/> | <input type="checkbox"/> |
| 31 | IN | Proper cooling methods used; adequate equip. for temperature control. | <input type="checkbox"/> | <input type="checkbox"/> | UTENSILS AND EQUIPMENT | | | | |
| 32 | NO | Plant food properly cooked for hot holding | <input type="checkbox"/> | <input type="checkbox"/> | 45 | IN | Food and nonfood contact surfaces; cleanable, properly designed, constructed and used | <input type="checkbox"/> | <input type="checkbox"/> |
| 33 | IN | Approved thawing methods used. | <input type="checkbox"/> | <input type="checkbox"/> | 46 | IN | Warewash facilities; installed, maintained, and used | <input type="checkbox"/> | <input type="checkbox"/> |
| 34 | IN | Thermometers provided and accurate | <input type="checkbox"/> | <input type="checkbox"/> | 47 | IN | Non-food contact surfaces clean | <input type="checkbox"/> | <input type="checkbox"/> |
| FOOD PROTECTION | | | | | PHYSICAL FACILITIES | | | | |
| 35 | IN | Food properly labeled original container | <input type="checkbox"/> | <input type="checkbox"/> | 48 | IN | Hot and cold water available, under pressure | <input type="checkbox"/> | <input type="checkbox"/> |
| 36 | IN | Pests and animals not present, no unauthorized persons | <input type="checkbox"/> | <input type="checkbox"/> | 49 | IN | Plumbing installed; proper backflow devices | <input type="checkbox"/> | <input type="checkbox"/> |
| 37 | OUT | Contamination prevented during food preparation storage and display | <input type="checkbox"/> | <input type="checkbox"/> | 50 | IN | Sewage and wastewater properly disposed | <input type="checkbox"/> | <input type="checkbox"/> |
| 38 | IN | Personal cleanliness, jewelry | <input type="checkbox"/> | <input type="checkbox"/> | 51 | IN | Toilet facilities, properly constructed, supplied and clean | <input type="checkbox"/> | <input type="checkbox"/> |
| 39 | IN | Wiping cloths; properly used and stored | <input type="checkbox"/> | <input type="checkbox"/> | 52 | IN | Garbage and refuse, properly disposed facilities and maintained | <input type="checkbox"/> | <input type="checkbox"/> |
| 40 | NO | Plant food cooking for hot hold Washing all fruits and vegetables | <input type="checkbox"/> | <input type="checkbox"/> | 53 | IN | Physical facilities installed maintained and clean | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | 54 | IN | Adequate ventilation and lighting, designed and used. | <input type="checkbox"/> | <input type="checkbox"/> |

Menu Review:
Review Conducted
☒ yes
☐ no
- New menu items
☐ Yes
☒ No
New items

New processes:
Does new process require variance
☐yes
☐ no

What interim step was taken pending variance

Addition to Consumer Advisory
☐ yes
☐ no
New menu item which requires consumer advisory

Concerns / Corrections Suggested:

| TEMPERATURES – Refrigeration/hot hold/cook | | | | | |
|--|---------------------|--|---------------------|--|----------------|
| Item / Location | Temp | Item / Location | Temp | Item / Location | Temp |
| walk in cooler | 39°F | upright refrigerator | 40°F | deli display | 40°F |
| prep cooler | 41°F | hot hold | 138°F | -- | ° F |
| Cook pork / vegetables – pizza | 168°F | Cook -- | ° F | Cook -- | ° F |
| WAREWASHING INFORMATION | | | | | |
| Machine Name | Sanitization Method | Thermo Label confirmed | PPM/ temp | Sanitizer Name / Approved Y/N | Sanitizer Type |
| | sanitizing machine | <input type="checkbox"/> yes <input type="checkbox"/> No | --ppm / °F rinse | <input type="checkbox"/> Yes <input type="checkbox"/> No | chlorine |

CDC Risk Code Factor Abbreviations and Violation by Category Numbers Table

(Use this table to group CDC risk factor listed below with violation from page 1)

| Unsafe Sources (US) | Inadequate Cooking (IC) | Improper Hold (IH) | Cross Contamination (CC) | Personal Hygiene (PH) | Other CDC Factors (O) |
|------------------------|----------------------------|-----------------------|-----------------------------|--------------------------|--------------------------|
| 9 | 16 | 18 | 13 | 3 | 1A |
| 10 | 17 | 19 | 14 | 4 | 1B |
| 11 | | 20 | 15 | 5 | 2 |
| 12 | | 21 | | 6 | 23 |
| | | 22 | | 7 | 24 |
| | | | | 8 | 25 |
| | | | | | 26 |

For each violation cited, use above table and record CDC Risk Code Factor abbreviation (such as “US” or “IH”), violation number, list from the Wisconsin Food Code (WFC) the reference number that refers to the area in violation.

Record CDC risk code abbreviation, violation # from 1st page, violation description, Food Code reference, corrective action, and score.

| CDC Code | Violation number | Description of violation, WFC Reference Number including code reference text / Corrective Action Required – Note date(s) of repeat violations on previous inspections. | Compliance Date/ Corrected on site (COS) |
|----------|------------------|---|--|
| CC | 13 | <p>In retail display coolers celery was noted stored immediately adjacent to and in contact with raw shell eggs. Packaging was on the same surface where broken eggs could contaminate raw celery.</p> <p>WISCONSIN FOOD CODE REFERENCE 3-302.11 Packaged and Unpackaged Food - Separation, Packaging, and Segregation.C</p> <p>(A) FOOD shall be protected from cross contamination by:</p> <p>(1) Separating raw animal FOODS during storage, PREPARATION, holding, and display from:</p> <p>(a) Raw READY-TO-EAT FOOD including other raw animal FOOD such as FISH for sushi or MOLLUSCAN SHELLFISH, or other raw READY-TO-EAT FOOD such as vegetables, and</p> <p>(b) Cooked READY-TO-EAT FOOD;</p> | COS |

| | | | |
|---|----|---|----|
| | | <p>CORRECTIVE ACTION Adequate separation must be maintained between raw animal products and produce. Items were separated to prevent potential cross contamination.</p> | |
| O | 26 | <p>Sanitizer containers noted stored on a shelf below food contact utensils were noted stored without covers. Potential for splash and direct contamination of chemical fumes. .</p> <p>WISCONSIN FOOD CODE REFERENCE 7-202.12 Conditions of Use.C</p> <p>POISONOUS OR TOXIC MATERIALS shall be:</p> <p>(2) Contamination including toxic residues due to drip, drain, fog, splash or spray on FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES is prevented, and for a pesticide, this is achieved by:</p> <p>(a) Removing the items,</p> <p>(b) Covering the items with impermeable covers, or</p> <p>CORRECTIVE ACTION All chemicals shall be maintained with covers to prevent splash and evaporation of chemical vapor.</p> | -- |

Use this section for Good Retail Practice (GRP) Violations

| Violation # | Description of violation, WFC Reference Number / Corrective Action Required | Compliance Date/ Corrected during inspection |
|-------------|--|--|
| 37 | <p>Food display was noted directly on the floor with product at floor level.</p> <p>WISCONSIN FOOD CODE REFERENCE 3-305.11 Food Storage.</p> <p>(A) Except as specified in ¶¶ (B) and (C) of this section, FOOD shall be protected from contamination by storing the FOOD:</p> <p>(1) In a clean, dry location;</p> <p>(2) Where it is not exposed to splash, dust, or other contamination; and</p> <p>(3) At least 15 cm (6 inches) above the floor.</p> <p>(B) FOOD in PACKAGES and working containers may be stored less than 15 cm (6 inches) above the floor on case lot handling EQUIPMENT as specified under § 4-204.122.</p> <p>CORRECTIVE ACTION Displays should be elevated off the floor by 6" if food is stored a floor level.</p> | |
| 43 | <p>Single use nacho containers were noted stored for dispensing with food contact side exposed.</p> <p>WISCONSIN FOOD CODE REFERENCE 4-903.11 Equipment, Utensils, Linens, and Single-Service and Single-Use Articles.</p> | |

| | | |
|--|---|--|
| | <p>(A) Except as specified in ¶ (D) of this section, cleaned EQUIPMENT and UTENSILS, laundered LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES shall be stored:</p> <p>(1) In a clean, dry location;</p> <p>(2) Where they are not exposed to splash, dust, or other contamination; and</p> <p>(3) At least 15 cm (6 inches) above the floor.</p> <p>(B) Clean EQUIPMENT and UTENSILS shall be stored as specified under ¶ (A) of this section and shall be stored:</p> <p>(1) In a self-draining position that allows air drying; and</p> <p>(2) Covered or inverted.</p> <p>(C) SINGLE-SERVICE and SINGLE-USE ARTICLES shall be stored as specified under ¶ (A) of this section and shall be kept in the original protective PACKAGE or stored by using other means that afford protection from contamination until used.</p> <p>CORRECTIVE ACTION All food contact single use containers should be stored with food contact surface down to prevent possible contamination.</p> | |
| | <p>WISCONSIN FOOD CODE REFERENCE</p> <p>CORRECTIVE ACTION</p> | |
| | <p>WISCONSIN FOOD CODE REFERENCE</p> <p>CORRECTIVE ACTION</p> | |
| | <p>WISCONSIN FOOD CODE REFERENCE</p> <p>CORRECTIVE ACTION</p> | |

Long term controls in place

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Critical Violations which require greater than one re-inspection and/or repeated CDC Risk Factors violation(s) which are cited on 3 consecutive inspections shall result in the issuance of a re-inspection fee. Re-inspection fees are set based on the complexity of the establishment as follows:

- **Complex restaurants** \$250.00
- **Moderate restaurants** \$200.00
- **Simple restaurants** \$150.00
- **Retail >1 M** \$300.00
- **Retail 25K-1M** \$250.00
- **Retail remaining** \$200.00

Violations must be corrected by the compliance date, unless some arrangement has been made with Menasha Health Department. Re-inspection fees will be assessed to all CDC Risk Factor violations requiring more than (1) re-inspection or if the same CDC Risk Factor violation is cited on 3 consecutive inspections. Re-inspection fees

will be billed to the owner of the establishment. Failure to pay re-inspection fee shall result in the following potential legal actions:

- **Temporary revocation of license**
- **License will not be renewed pending payment**
- **Enforcement conference with licensee or licensee representative which would require signed compliance agreement.**

Operators who wish to challenge the assessment of a re-inspection fee shall submit in writing circumstances and reason that they feel the re-inspection fee should not have been assessed. This statement must be submitted to the Public Health Director. The issue will then be addressed by the City of Menasha Board of Health. Any violations and /or enforcement shall be complied with pending appeal.

The City of Menasha posts all Health Department Inspection reports on the City of Menasha Web-Site.

Inspection Narrative and information on non-violation observations and/or suggestions:

I understand and agree to comply with the corrections ordered in this report. I understand the failure to comply could result in legal action including loss of license.

| | | | |
|---|-------------|---|-------------|
| | | | |
| PIC signature or authorized employee | Date | Sanitarian Signature Todd Drew, R.S. | Date |

Food Safety Fact Sheets Attached:

| | | | |
|--|---|--|---|
| <input type="checkbox"/> Employee Health | <input type="checkbox"/> Employee Reporting Agreement | <input type="checkbox"/> Personal Hygiene | <input type="checkbox"/> Bare hand contact |
| <input type="checkbox"/> Responsibilities of the PIC | <input type="checkbox"/> Disposable glove use | <input type="checkbox"/> Cross – Contamination | <input type="checkbox"/> Demonstration of Knowledge |
| <input type="checkbox"/> Cooling Procedures | <input type="checkbox"/> Thawing Procedures | <input type="checkbox"/> Active Managerial Control | <input type="checkbox"/> Certified Food Manager |
| <input type="checkbox"/> Consumer Advisory | <input type="checkbox"/> HACCP | <input type="checkbox"/> HACCP Hazard Analysis | <input type="checkbox"/> Serving Safe Food |
| <input type="checkbox"/> Pre-Inspection | <input type="checkbox"/> Time as a Health Control | <input type="checkbox"/> Allergens | <input type="checkbox"/> Thermometer Calibration |
| <input type="checkbox"/> Catering | <input type="checkbox"/> Cooking Temperatures | <input type="checkbox"/> Microwave Cooking | <input type="checkbox"/> Interpreting the Inspection Report |
| <input type="checkbox"/> Variance / HACCP | <input type="checkbox"/> Frozen Foods | <input type="checkbox"/> Receiving | <input type="checkbox"/> Chemical / Physical Contamination |
| <input type="checkbox"/> Common Foodborne Illnesses | <input type="checkbox"/> Outdoor Events | <input type="checkbox"/> Serving Safe Food | <input type="checkbox"/> Effective Sanitizing |
| <input type="checkbox"/> Organizing Coolers | <input type="checkbox"/> Date Marking | | |